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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

*Only for new nonprovisional applications under
37 C.F.R. § 1.53(b)*

Attorney Docket No. A-5997

First Inventor or Application No. ADDINGTON ET AL.

Title SYSTEM AND METHOD FOR AUTOMATICALLY DETERMINING SERVICE GROUPS IN A SUBSCRIBER NETWORK

Express Mail Label No. EL544621090US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and duplicate for fee processing)
2. Specification [Total Pages 24]
3. Drawings (35 U.S.C. § 113) [Total Sheets 9]
4. Oath or Declaration [Total Pages 5]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. DELETION OF INVENTORS
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b)

16. If a CONTINUING APPLICATION, check appropriate box, and supply the information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No:

Prior application information: Examiner: Group Art Unit:

17. CORRESPONDENCE ADDRESS Customer Number or Bar Codeor Correspondence address below

Name

Address

City

Country

5642

PATENT AND TRADEMARK OFFICE

Zip Code

Fax

Name (Print/type)	JOHN ERIC WEST	Registration No. (Attorney/Agent)	46,279
Signature		Date	June 13, 2000

Docket No.: A-5997

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: ADDINGTON ET AL.
DOCKET NO.: A-5997
TITLE: SYSTEM AND METHOD FOR AUTOMATICALLY DETERMINING
SERVICE GROUPS IN A SUBSCRIBER NETWORK

June 13, 2000

FEE TRANSMITTAL FORM

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

The Commissioner is hereby authorized to charge the indicated fees and any additional fees and to credit any overpayments to Deposit Account No. 19-0761

The fee is calculated as shown below.

	No. of Claims Filed	No. of Claims Paid For	No. of Extra Claims	Rate	Fee
Independent Claims	7	3	4	\$ 78.00	\$312.00
Total Claims	25	20	5	\$ 18.00	\$90.00
Multiple Dependent Claims				\$260.00	\$000.00
Basic Filing Fee				\$690.00	\$690.00
Total Filing Fee					\$1092.00

One duplicate original of this sheet is enclosed.

SEND CORRESPONDENCE TO:

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Intellectual Property Department
One Technology Parkway
Norcross, GA 30092-2967

By: 

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Agent of Record
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Certificate of Mailing

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as EXPRESS MAIL in an envelope addressed to:

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Washington, DC 20231

on June 13, 2000.


Marcia Burdick